



STATE OF RHODE ISLAND

**APPLICATION FOR NON-RESIDENT ANNUAL SHELLFISH
LICENSE**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Sex: M/F

Driver's License Number and Issuing State:

#: _____ State: _____

Hair Color: _____ Weight: _____ Eye Color: _____ Height: _____

This license is available to non-residents of the State of Rhode Island. Any non-resident over the age of twelve (12) years wishing to take or possess shellfish recreationally in Rhode Island waters must obtain an annual or a tourist shellfishing license. This license will expire on the last day in February annually.

To obtain this license please attach:

1. A copy of a valid ID.
2. Check or money order in the amount of \$200.00
3. This application filled out in full and signed at bottom.

Please make checks payable to the State of Rhode Island/DEM, and mail to Boat Registration & Licensing/DEM, 235 Promenade Street, Providence, Rhode Island 02908. Telephone #: (401) 222-6647.

Signature of Applicant

Date